PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

198-932

CLAIMS AS FILED - PART ((Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			21				ſ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2/ minus 20=		• /			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			v minus 3 ±		0			X42=		OR	X84=	-
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=		OR	+280=	·
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	738	
CLAIMS AS AMENDED - PART II											OTHER	,
12	-2-04	(Colum		nn 2) (Column 3)		_	SMALL ENTITY		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 21	Minus	** 2	21	= /		X\$ 9=	,	OR	X\$18=	
	Independent	• 2	Minus	*** 6		= /		X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		¹	+140=		OR	+280=	
							L.	TOTAL DDIT FEE		OR	TOTAL ADDIT, FEE	
	•	(Column 1)		(Colur	nn 2)	(Column 3)	^	DBH. FEC	<u> </u>		ADDN. I EE	
AMENDMËNT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	RRS		=	1	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							,		ОR.		
							L	+140=		OR	+280≃	
							A	TOTAL DOIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL , FEE
	Total	•	Minus	. ##		=		X\$ 9=		OR	X\$18=	
	Independent	* .	Minus	***		<u> </u>	 	X42=			X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT, FEE	
		mber Previously Pa					er toun	d in the app	oropriate box	c in col	ս ո ւռ 1.	